
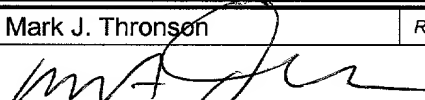


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PTO/SB/05 (03-01)  
Approved for use through 10/31/2002. OMB 0651-0032  
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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. R2184.0105/P105	
(Only for new nonprovisional applications under 37 CFR 1.53(b))		First Inventor	Kouichi Narahara
		Title	DOCUMENT MANAGEMENT APPARATUS,, etc.
		Express Mail Label No.	
<b>APPLICATION ELEMENTS</b>		<b>ADDRESS TO:</b> Box Patent Application Commissioner for Patents Washington, DC 20231	
See MPEP chapter 600 concerning utility patent application contents.			
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification [Total Pages 90]		a. <input type="checkbox"/> Computer Readable Form (CRF)	
(preferred arrangement set forth below)		b. Specification Sequence Listing on:	
- Descriptive title of the invention		i. <input type="checkbox"/> CD-ROM or CD-R (2 copies), or	ii. <input type="checkbox"/> paper
- Cross Reference to Related Applications		c. <input type="checkbox"/> Statements verifying identity of above copies	
- Statement Regarding Fed sponsored R & D		<b>ACCOMPANYING APPLICATIONS PARTS</b>	
- Reference to sequence listing, a table, or a computer program listing appendix		9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
- Background of the Invention		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of Attorney	
- Brief Summary of the Invention		11. <input type="checkbox"/> English Translation Document (if applicable)	
- Brief Description of the Drawings (if filed)		12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations	
- Detailed Description		13. <input type="checkbox"/> Preliminary Amendment	
- Claim(s)		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
- Abstract of the Disclosure		15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 30]		16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
5. Oath or Declaration [Total Pages 5]		17. <input type="checkbox"/> Other:	
a. <input checked="" type="checkbox"/> Newly executed (original or copy)			
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)			
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).			
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____ Prior application information: Examiner _____ Group / Art Unit: _____ For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
<b>19. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		 24998	
		<input checked="" type="checkbox"/> Correspondence address below	
Name	Mark J. Thronson Dickstein Shapiro Morin & Oshinsky LLP		
Address	2101 L Street, NW		
City	Washington	State	DC
Country		Zip Code	20037
	Telephone	202-775-4742	Fax
Name (Print/Type)	Mark J. Thronson	Registration No. (Attorney/Agent)	33,082
Signature		Date	July 10, 2001

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2001</h2> <p style="margin: 0; font-size: small;">Patent fees are subject to annual revision.</p>		<b>Complete if Known</b>																																																																																																																																																																																															
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 1,144.00		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>Not Yet Assigned</td> </tr> <tr> <td>Filing Date</td> <td>July 10, 2001</td> </tr> <tr> <td>First Named Inventor</td> <td>Kouichi Narahara</td> </tr> <tr> <td>Examiner Name</td> <td>Not Yet Assigned</td> </tr> <tr> <td>Group Art Unit</td> <td>N/A</td> </tr> <tr> <td>Attorney Docket No.</td> <td>R2184.0105/P105</td> </tr> </table>		Application Number	Not Yet Assigned	Filing Date	July 10, 2001	First Named Inventor	Kouichi Narahara	Examiner Name	Not Yet Assigned	Group Art Unit	N/A	Attorney Docket No.	R2184.0105/P105																																																																																																																																																																																		
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<p><b>1.</b> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">04-1073</span></p> <p>Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Dickstein Shapiro Morin &amp; Oshinsky LLP</span></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17     <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p><b>3. 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<p><b>SUBMITTED BY</b></p> <p>Name (print/type): Mark J. Thronson     Registration No. (Attorney/Agent): 33,082     Telephone: (202) 775-4742</p> <p>Signature:      Date: July 10, 2001</p>		<p><b>SUBTOTAL (3)</b>     (\$)</p> <p>40.00</p>																																																																																																																																																																																															